STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

Executive Director

(Print Name of lobbyist)

Judy A. Silva, Cordell A. Johnston, Barbara T. Reid, Timothy W. Fortier I. Name of Lobbyist(s) II. Name of lobbyist's partnership, firm or corporation, if any: New Hampshire Municipal Association (Name of partnership, firm or corporation) 25 Triangle Park Drive NH 03301 Concord Business Address: (Street) (Town/City) (State) (Zip Code) 603 224,7447 e-mail <u>governmentaffairs@nhmunicipal.org</u> (Telephone) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: (Full Name of Client as it appears on the Lobbyist Registration Form) OR ☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. July 26, 2017 🟝 April 26, 2017 IV. Date of Report activity from 4/1/17 to 6/30/17 activity from date of registration to 3/31/17 Reports cover: October 25, 2017 January 31, 2018 activity from 7/1/17 to 9/30/17 activity from 10/1/17 to 12/31/17 V. There have been no fees received and no reportable transactions made since the last report. \Box If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: [X] If you have received fees or made expenditures, you must file Addendum A-Fees and Expenses ☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B—Report of Honorariums or Expense Reimbursement ☐ If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. July 25, 2017 (Date)

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Judy A. Silva, Cordell A. Johnston, Barb	ara T. Reid,	Timothy W. Fortier
II. Name of lobbyist's	partnership, firm or corporation, if any:		
Ne	ew Hampshire Municipal Association		
(Name of	f partnership, firm or corporation)		
III. Name of Client No	ew Hampshire Municipal Association	Date	July 25, 2017
to lobbying, including fe	t of all fees received from the client identified above es for services such as public advocacy, government itoring legislation, and related legal work. The gr	t relations, or	public relations service
a) Total of all fees received in this reporting period			52.08
	ved this calendar year, prior to this reporting period e total of all prior monthly reports for this calendar y		63.81
c) Total of all fees received to date (Add lines a and b)		c) \$69,	516.19
d) Indicate the amount of yet been paid	f any such fees that are due, but have not	d) \$(0.00
fees. Separate reports at the lobbyist(s)/firm that Expenses are to be reporduring the reporting peri individual expenses when lunch where the cost was being lobbied, purchase (c) an itemized statement any purpose not covered ceremonial object to be restaurant expenses for a contributions will be reported.	rtnerships, firms, or corporations are required to refer to be filed for expenditures made relative to each are unrelated to any one client a separate report red in one of three categories of expenses: (a) the od for salaries, benefits, support staff, and office ere the expenditure was of \$25.00 or less (for example \$25.00 or less, purchase of a pen with a value of less of a ceremonial object given to a person being lobbit of each individual expenditure made during this republy (a) (for example: purchase of a meal with value given to the subject of lobbying with a value great a legislative reception). Expenses for honorariums of the subject and should not be reported.	client and if expenses; (b) the expenses; (b) the expenses; (b) the expenses than \$10 the expense reing period of the expense reing \$25, bs, expense reing than \$25, bs, expense reing period of the expense reing \$25, bs, expense r	spenditures are made by for the lobbyist(s)/firm tal of all expenses paid ne aggregate total of all hased during a busines at is given to the person e of \$25.00 or less); and f greater than \$25.00 for than \$25, purchase of the ut not greater than \$50 nbursement, or political
a) Total aggregate expen support staff, and office e	a) \$ _25,0	52.08	
b) Total aggregate of expin a), of \$25 or less.	penditures during this reporting period, not reported	b) \$ <u>0.0</u>	0
c) Total of all itemized e	xpenditures reported in detail in section VI.	c)\$ 0.0	00

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$25,052.08
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$44,463.81
f) Total of all expenses year to date	f) \$69,516.19
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
	·
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
Indellolle	July 25, 2017
(Signature of lobbyist) Judy A. Silva	(Date)
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Statement of Income and Expenses for:	st Barbara T. Reid
Name of Lobbying partnership, firm, or corpora	ation:
Name of Client (leave blank if Statement is for particular client): New Hampshire Municipal	the partnership, firm, or corporation and not related to any l Association
Date of Report (check one):	
April 26, 2017 □ July 26, 2017 🔯	October 25, 2017 January 31, 2018
	Statement of Income and Expenses described above, and Statement (insert the number of Addendum forms being
X Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
complete to the best of my knowledge and belie	
Signature of Johnson	July 25, 2017
(Signature of lobbyist)	(Date)
Barbara T. Reid	<u></u>
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Statement of Income and Expenses for: Cordell A. Johnston				
Name of Lobbying par	tnership, firm, or corpo	oration:		
Name of Client (leave particular client): New	blank if Statement is fow Hampshire Municip	or the partnership, firm, or oal Association	corporation and not related	d to any
Date of Report (check	one):			
April 26, 2017 □	July 26, 2017 🛣	October 25, 2017 🗆	January 31, 2018 □	
		he Statement of Income ar at Statement (insert the m		
X Addendum A(s	s).			
Addendum B(s	s).			
Addendum C(s	3).			
I hereby swear or affire complete to the best of		nformation on the Statemer lief.	nt and each Addendum is t	rue and
0.1.00 3 1.4			July 25, 2017	
(Signature of lobbyist)	*************************************		(Date)	
Cordell A. Johnsto	n			
(Print Name of lobbyis	t)			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:	Timothy W. Fortier
Name of Lobbying partnership, firm, or corporati	on:
Name of Client (leave blank if Statement is for the particular client): New Hampshire Municipal A	e partnership, firm, or corporation and not related to any association
Date of Report (check one):	
April 26, 2017 □ July 26, 2017 🛣 0	October 25, 2017 January 31, 2018
	tatement of Income and Expenses described above, and tatement (insert the number of Addendum forms being
X Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing inforce complete to the best of my knowledge and belief.	nation on the Statement and each Addendum is true and
Tilley With	July 25, 2017
(Signature of obbyist)	(Date)
Timothy W. Fortier	
(Print Name of lobbyist)	